

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Subsection (b) of 35 U.S.C. §132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA).

The Amendment/Reply filed on :

Application Number	10/750,757				
Filing Date*	January 5, 2004				
First Named Inventor	DENG				
Group Art Unit	2872				
Examiner Name	E. Cherry				
Attorney Docket No.	3226-51				

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

NOTE: * Filing date must be on or after June 8, 1995; but if before May 29, 2000, then consider a CPA.

1. Please consider the following as the required submission under 37 C.F.R. §1.114:

		b. The Information Disclosure Statement (IDS) filed on (date):													
		c.	The Brief/Reply Brief filed on (date):												
		d.	The page(s) of Form PTO-1449 and copy of each listed document filed (date):												
	×	e.	e. Other: PETITION TO CORRECT INVENTORSHIP OF PATENT UNDER 37 CFR § 1.48(a) FILED HEREWITH.												
	2.	A <u>T</u>	THREE- month Petition for Extension of Time is filed herewith.												
Ø	3.	The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17 to Deposit Account No. 501874.													
×	4.		Authorization is hereby given to charge Deposit Account No. 501874 in the amount of \$395 to cover the Small Entity Filing Fee (\$395). A duplicate of this form is enclosed herewith.												
	5.	Thi	This Request is transmitted by facsimile to number (703)												
	6.	6. Other:													
THE RCE FEE IS CALCULATED AS FOLLOWS: Basic											Basic Fee:	\$790.00			
Total Claims: 6 - 20 (highes							(highest number pr	highest number previously paid for) = 0.00				0			
Independent Claims: 1 - 3					-	3	(highest number previously paid for) = 0.00				X \$86 =	0			
Correspondence Address: TROXELL LAW OFFICE PLLC 5205 Leesburg Pike, Suite 1404 Falls Church, VA 22041							•	Multiple Dependent Claim (add \$280.00):				0			
								Subtotal:				\$790.00			
								50% Reduction if Small Entity Status:				\$395.00			
Phone: 703-575-2711 Fax: 703-575-2707							x: 703-575-2707	Total: \$395.00				\$395.00			
Date:							Name:		Sig	nature:		Reg. No.			
October 3, 2006							Bruce H. Troxell		37/40			26,592			